BEST AVAILABLE COPY

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

004-7051

| CLAIMS AS FILED - PART I (Column 1) (Column 2) | | | | | | | | SMALL ENTITY TYPE | | OR | OTHER THAN OR SMALL ENTITY | |
|---|--|---|---------------|----------------------|---------------------------------|------------------|---|---------------------|------------------------|---------|-------------------------------|------------------------|
| TOTAL CLAIMS | | | 69 | | | | | RATE | FEE | | RATE | FEE |
| FO | ₹ | | NUMBER FILED | | NUMBE | R EXTRA | | BASIC FEE | 370.00 | OR | BASIC FEE | 740.00 |
| TO | TAL CHARGEA | BLE CLAIMS | 69 minus 20= | | * 4 | 9 | | X\$ 9= | | OR | X\$18= | 882 |
| IND | EPENDENT CL | AIMS | 5 minus 3 = | | | 2 | | X42= | | OR | X84= | 1/8 |
| MULTIPLE DEPENDENT CLAIM PRESENT | | | | | | | | +140= | | OR | +280= | _ |
| * If the difference in column 1 is less than zero, enter | | | | | r "0" in c | olumn 2 | | TOTAL | | OR | TOTAL | 1790 |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) | | | | | | | | SMALL E | NTITY | OR | OTHER SMALL | |
| AMENDMENT A | | CLAIMS REMAINING AFTER AMENDMENT | | HIGH NUM PREVI | HEST HBER OUSLY FOR | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | * | Minus | ** | | = | | X\$ 9= | | OR | X\$18= | |
| | Independent | * | Minus | *** | T () A () A | = | | X42= | 4 | OR | X84= | |
| | FIRST PRESE | NTATION OF M | ULTIPLE DEF | ENDEN | I CLAIM | | J | +140= | | OR | +280= | |
| | | | | | | | | TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. FEE | |
| | |) | ADDII. FEE | | | ADDIT. I EL | | | | | | |
| AMENDMENT B | | (Column 1) CLAIMS REMAINING AFTER AMENDMENT | | NUM PREVI | HEST MBER IOUSLY DFOR | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | * | Minus | ** | | = | | X\$ 9= | | OR | X\$18= | |
| | Independent | * | Minus | *** | | = | 1 | X42= | | OR | X84= | |
| L | FIRST PRESE | NTATION OF M | ULTIPLE DEF | PENDEN | TCLAIM | | 7 | +140= | | OR | +280= | |
| | | | | | | | | TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. FEE | |
| (Column 1) (Column 2) (Column 3) | | | | | | | | ADDN: 1 LL . | | | ADDIT. TEE | |
| AMENDMENT C | | CLAIMS REMAINING AFTER AMENDMENT | | HIGI NUM PREVI | HEST MBER IOUSLY D FOR | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | * | Minus | ** | | = | | X\$ 9= | | OR | X\$18= | |
| | Independent | <u>l*</u> | Minus | *** | <u> </u> | - | | X42= | | OR | X84= | |
| Ľ | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | +140= | | OR | +280= | |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***OTAL ADDIT. FEE | | | | | | | | | | OR | TOTAL ADDIT, FEE | |
| ••• | If the "Highest Nu | imber Previously F nber Previously Pa | aid For IN TH | IS SPACE | is less that | ın 3, enter "3." | , | | propriate box | k in co | | |